

PGY-2 PEDIATRIC PHARMACY RESIDENCY 2013-2014
MEDICAL UNIVERSITY OF SOUTH CAROLINA

1. **Intended Outcomes of PGY-2 Pediatric Pharmacy Residency Training**

A resident successfully completing the 1-year PGY-2 Pediatric Pharmacy Residency will be able to manage all of the pharmacotherapy needs of children (newborns through adolescents) in a variety of health care settings. The graduate also will understand and be able to provide specialized nutrition therapy services (enteral and parenteral nutrition) to these patients. Additionally, the graduate will be able to serve as a preceptor for PharmD candidates on institutional or advanced pharmacy practice experiential rotations and PGY-1 residents completing pediatrics learning experiences, deliver effective didactic education to health care practitioners or students, and participate actively as part of an interdisciplinary team to develop, modify, and implement treatment protocols/guidelines and institutional practices.

2. **Purpose Statement for the PGY-2 Pediatric Pharmacy Residency**

The purpose of the PGY-2 Pediatric Pharmacy Residency program is to prepare pharmacists that have the advanced training necessary to practice as pediatric clinical pharmacy specialists in a variety of pediatric practice environments. These extensively trained individuals will be able to identify, prevent, and resolve medication- and nutrition-related problems, participate as active members of interdisciplinary health care teams, provide leadership in pediatric pharmacy practice, and deliver quality education to various health care practitioners and students. Additionally, graduates of the PGY-2 Pediatric Pharmacy Residency program will be able to successfully attain board certification in pediatric pharmacy practice.

3. **Listing of Current Preceptors**

Kathy Chessman
Toby Cox
Sandra Garner
Lauren Haney
Julie Heh
Kate Seningen
Jill Thompson
Don Wiest

4. Residency Program

The PGY-2 Pediatric Pharmacy Residency is a 1-year postgraduate training program designed to develop essential knowledge, skills, and attitudes for pharmacy practice at a children's hospital or any health care institution that cares for children. The residency program provides the flexibility to adapt to the resident's specific learning needs and goals. Training is provided through a variety of concentrated and longitudinal clinical rotations and other activities.

5. Residency Rotations

There are 8 core (**required**) learning experiences, including the mandatory orientation month for residents coming from PGY-1 programs outside MUSC:

Orientation (July) – 1 month

General Pediatrics – 1 month

Pediatric Intensive Care – 2 months

Neonatal Intensive Care – 2 months

Pediatric Cardiothoracic Intensive Care Unit/Cardiology – 1 month

Pediatric Hematology/Oncology – 1 month

Pediatric Surgery – 1 month

Pediatrics – Teaching – 1 month

The program is flexible in its design to offer 2-3 months of elective rotations targeted to the resident's interests. Any of the rotations listed above may be repeated or elective rotations can be tailored specifically to meet an individual resident's needs. For example, a resident accepting a job in nephrology/kidney transplantation completed a 1-month elective rotation in which she rounded with the Pediatric Nephrology consult service, assisted with the care of inpatient nephrology-service patients, and attended Pediatric Nephrology Clinic four half-days per week.

Elective rotations can also be completed in:

Pediatric Infectious Diseases

Solid Organ Transplantation

Pediatric Psychiatry

Pediatric Emergency Medicine

6. Residency Preceptor Expectations

Each clinical preceptor is responsible for the coordination of their own learning experience. Topics that must be discussed during the month and the specific residency goals to be taught and evaluated during the month will be assigned by the Residency Program Director (RPD) in consultation with the preceptor. At the request of the RPD, the preceptor will modify these goals accordingly should the resident need remediation in any particular area. The residency preceptor will exhibit the characteristics and aptitude

necessary for PGY-2 residency training including the mastery of the four preceptor roles (direct instruction, modeling, coaching, and facilitation). The residency preceptor will guide and monitor the resident's activity and service throughout the learning experience. The residency preceptor will provide ongoing formative feedback for the resident, as well as a midpoint formative and end-of-experience summative evaluation of the resident's performance in Resitrak[®], with the goal of advancing the resident's competency on the specific goals assigned to the experience.

The specific responsibilities are to:

- Develop and maintain goals and objectives for the specific residency learning experience(s) in consultation with the RPD.
- Review the resident's training plan and resident's previous performance and modify the learning experience (with the RPD) accordingly.
- Orient the resident to the rotation setting and monitor/evaluate/critique the resident's performance throughout the experience.
- Understand and respect the resident's responsibilities in other aspects of the residency program (e.g., projects, presentations, clinical staffing, on-call, and manuscript preparation).
- Provide the resident a verbal and written midpoint by the end of the second week of the experience and final summative evaluation by month's end in Resitrak[®] as outlined in the residency manual.
- Advise the RPD in a timely manner of any interventions that may be needed relevant to the resident's performance in any aspect of the residency program.
- Actively participate in the resident recruitment process by interviewing prospective candidates, providing feedback to the RPD after these interviews, and participating in meetings to discuss the applicants and their ranking.
- Actively participate in an annual feedback in which preceptors and the RPD consider overall program changes based on evaluations, observations, and direct resident feedback and surveys.

7. Resident Advisor Role

The Residency Advisor(s) upon appointment by the RPD will be responsible for the supervision, guidance, and on-going evaluation of the resident's progress throughout the residency, as well as serve in an informal professional mentoring role (e.g., career planning).

Note: Generally, this role for the PGY-2 Pediatric Pharmacy residents is formally assigned to the RPD, but informally occurs throughout the year with all of the preceptors and others.

8. Resident Responsibilities

The PGY-2 Pediatric Pharmacy resident's role is that of a licensed, practicing pharmacist who is a student of pediatric pharmacy. The resident is expected to continually increase their knowledge and clinical skills related to pediatric pharmacy practice and administration. The resident will participate in ongoing clinical and administrative services with the assistance of the RPD and the residency preceptors and develop their unique skill set into that of a competent, advanced pediatric pharmacy practitioner. The resident must be willing to both accept and apply constructive criticism in addition to performing self-evaluations of their performance for all learning experiences to achieve this end.

In order to promote an effective and productive residency experience, the relationship between a resident and rotation preceptor must be highly communicative, and a meaningful on-going dialogue must be achieved. Specifically, the resident will:

- Discuss with the preceptor and sign the learning experience orientation form in Resitrak[®] on the first day of each new clinical rotation. All clinics, meetings, seminars, projects, staffing, on-call, vacations, and other activities that will take the resident away from the learning experience during the month should be discussed at this time, including the project half-day that the resident will take during the month.
- Meet all deadlines set for them in Resitrak[®] or otherwise as outlined in the MUSC 2013-14 residency manual. Other non-rotation-related deadlines (e.g., project, medication use evaluation, seminar/RITE/lecture preparation or delivery, manuscript preparation) should also be adhered to and discussed on the first day of rotation with the preceptor, if applicable.
- Understand the preceptor's expectations for daily activities, services provided, and preceptor contact. If expectations are unclear, the resident should first ask the preceptor for clarification, then, if still unclear, discuss with the RPD.
- Maintain a bi-monthly resident hours Excel[®] spreadsheet documenting all workload hours in accordance to ASHP standards.
- Maintain an Excel[®] spreadsheet of the disease-states/conditions noted in the ASHP Accreditation Standards Appendix for review during each quarter's discussion with the RPD.
- Participate in designated pharmacy activities (e.g., patient care rounds/conferences, lectures/seminars/RITE, departmental and clinical staff meetings) in accordance with preceptor or residency requirements (see MUSC 2013-14 residency manual).
- Provide a detailed account of activities as they relate to the goals and objectives of the learning experience as outlined by the preceptor.
- Document all clinical interventions per Department of Pharmacy Services' policy.
- Maintain active communication with the preceptor, advisor, and/or RPD.

9. Clinical Service Weekend/Pharmacy Operations Experience Responsibilities

The PGY-2 Pediatric Pharmacy resident will participate in the Pediatric Clinic Pharmacy On-Call Service throughout the year as assigned by the Pediatric Pharmacy Clinical Coordinator (approximately 1 week per month) and will staff in the Children's Hospital Pharmacy as scheduled by the Children's Hospital Operations Coordinator (approximately 16 hours per month). These experiences will augment their learning during the year and will assure that they are capable pharmacy practitioners upon graduation. Scheduled dates for the residency year for these learning experiences will generally be provided to the resident in July. The resident is responsible for arranging coverage for any necessary changes to these schedules and communicating the change to the appropriate individual (operations or clinical coordinator) and the RPD. For staffing, the resident will be evaluated quarterly by the Children's Hospital Pharmacy Operational Coordinator after gathering feedback from pharmacists working alongside the resident. A quarterly evaluation of the on-call experience will be assigned by the RPD to the on-call back-up during the last month of the quarter.

10. Individual Learning Experience Evaluations and Grading

The resident is expected to successfully complete and achieve **all** of the required outcomes according to ASHP Educational Outcomes, Goals and Objectives for PGY2 Pharmacy Residencies in Pediatrics:

Outcome R1: Demonstrate leadership and practice management skills in the pediatric patient care setting.

Outcome R2: Optimize the care of inpatient and outpatient pediatric patients by providing evidence-based, patient-centered medication therapy as an integral part of an interdisciplinary team.

Outcome R3: Serve as an authoritative resource on the optimal use of medication used to treat pediatric patients.

Outcome R4: Evaluate, manage, and improve the medication-use process in pediatric patient care areas.

Outcome R5: Demonstrate excellence in the provision of training or educational activities for pediatric health care professionals, health care professionals in training, and the public.

Outcome R6: Conduct pediatric pharmacy research.

The resident is expected to demonstrate proficiency in 90% or above of all activities linked to these specific outcomes via the various goals and objectives assigned from the learning experiences to successfully complete the MUSC program. The resident will first observe, then learn, act, and master a particular activity which will signify that they have achieved that goal. Achievement of goals is highly individualized based on the resident's learning experiences and thus not

applied to every resident in exactly the same way. Based on a review of all learning experience assessments and discussion with the resident and preceptors, the RPD will denote in Resitrak[®] when a Goal has been achieved for the residency program.

The following Elective Educational Outcomes may be assigned at the beginning of the resident's year based on interests and desired skills. Residents also completing the South Carolina College of Pharmacy Academic Preparation Program will be assigned Outcomes E1 and E3.

Outcome E1: Demonstrated added skills for functioning effectively in the pediatric pharmacy practice environment.

Outcome E2: Conduct outcomes research.

Outcome E3: Demonstrate skills required to function in an academic setting.

For these various elective outcomes, the resident will be expected to achieve at least 60% of the various goals and objectives to successfully achieve the outcome. Successful achievement of these outcomes are encouraged but not required to complete the MUSC PGY-2 Pediatric Pharmacy Residency program.